

## Planning Checklist for Implementing an Evidence-Based Hearing Screening Program



Early childhood education or health care staff organizing the hearing screening effort should print this Checklist. If a pediatric audiologist is (Step 3) to support your process (Step 3), work through each checklist item together.

- 1. Get acquainted with the instructional and implementation resources specifically for OAE and/or Pure Tone Audiometry screening available at [infanthearing.org](http://infanthearing.org).
- 2. Determine whether your setting is appropriate for hearing screening by reviewing the conditions that contribute to a sustainable screening context, including:
  - ongoing access to/relationships with children and families,
  - access to medical and audiological services,
  - a tracking system,
  - adequate staffing and budget,
  - focus on child language development and hearing, and
  - sufficient collaborative capacity.
- 3. Identify a pediatric audiologist partner to support your planning, training and implementation efforts. (Under *Implementation Resources* see, *Find an Audiologist*.)
- 4. Review Implementation Resources related to:
  - The screening method that will be used
  - The recommended screening and follow-up protocol
  - How to select screening equipment
  - The various tools available to support the program including documentation forms, letters, and the tracking tool.
  - Training opportunities
- 5. Determine who needs to be included in planning and implementation steps and how the individuals will potentially be incorporated into the process:
  - administrators,
  - any oversight committees,
  - screeners,
  - staff responsible for the program's documentation and tracking systems.

- 6. Carefully consider how the screening and follow-up protocol will be implemented and how children not passing the initial screening will be tracked through the process to completion, including:
  - How many individuals will be conducting the screening?
  - In what settings will screening take place?
  - How many pieces of equipment will be needed? How will equipment and supplies be stored, shared and maintained?
  - How will outcomes be documented and children requiring follow-up be tracked?
  - How often children will be screened?
  
- 7. Select and purchase screening equipment demonstrated to work effectively for age of children to be screened. If using OAE's, obtain sufficient disposable probe covers of different sizes, including adult sizes, necessary for the training, daily equipment check and the actual screening process. Be sure to elicit input from a pediatric audiologist partner in this selection process.
  
- 8. Develop a training and implementation timeline and plan. Arrange for training of screeners to occur once equipment and supplies are available and shortly before actual screenings are scheduled to begin. Seek the engagement of a pediatric audiologist or experienced screener to support the training process, especially the hands-on practice activities if possible. Be sure to have at least 4 adults and 5 children available for screening practice exercises.
  
- 9. Complete the training process including all recommended practice exercises. Make a plan for follow-up technical assistance that includes a review of the protocol and the capacity of the program's tracking system, "next steps" for children not passing the screening, quality improvement indicators and additional screener skill development as needed.
  
- 10. Contact your state Early Hearing Detection and Intervention (EHDI) or newborn hearing screening program to let them know about your screening efforts, to obtain relevant information and resources, and to make a plan for sharing screening outcomes if desired. Be sure to report to your State EHDI Program any child newly identified with a permanent hearing loss. Your EHDI program will be a source of additional resources to help your program and/or the child's family.